FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE

APPROVED AND FILED

95 MAY -1 AM 9:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000084227 (6)

1. Corporate Name
TAG-ALONG SYSTEMS, INC.

Principal Place of Business
307 VIA DEPALMAS
SUITE 92 ROYAL PALM PLAZA
BOCA RATON FL 33432

Mailing Address
307 VIA DEPALMAS
BOX 326
BOCA RATON FL 33429
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/09/1993
3a. Date of Last Report: 07/26/1994

2. Principal Place of Business
21 4511 N Dixie Hwy
22 Suite, Apt. #, etc.:
23 City & State: Boca Raton FL
24 Zip: 33431 25 County: PB

2a. Mailing Address
26 Box 7234
27 Suite, Apt. #, etc.:
28 City & State: Boca Raton FL
29 Zip: 33431 30 County: PB

4. FEI Number: 65-0456035 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
PEARLSTINE, JULES
1900 CORPORATE BLVD NW
SUITE 301
BOCA RATON FL 33431

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of sections 607.0502 and 617.0502, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of sections 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

Title	D
Name	WINIG, STEPHEN U
Street Address	2165 NW 62ND DR.
City-St-Zip	BOCA RATON FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 4/30/95 Daytime Phone: 407 3117063

0436934 FP